

Application for Sponsorship

Touch a Life

A child sponsorship ministry of the Final Frontiers Foundation, Inc.

I.D. _____

Personal Information on the child:

Name:

Daivin Ariel Cruz Cruz

Name child is called by if different:

Yepito

Birthday (d/m/y):

21 December 1998

Nationality:

Honduran

Country:

Honduras

Town:

San Juan de Flores

What is the child's current status?

- ☐ Orphan
- ☐ Abandoned
- ☒ **Destitute**
- ☐ Other

Please write a story about how the child became orphaned or destitute or abandoned. (Make it as detailed as possible and use additional paper if necessary.)

He comes from a poor family.

Family Information:

Does the child have any natural brothers or sisters?
(If the answer is yes, please list their names and current ages.)

Name: **Maxima Daniela Cruz Cruz** Age: **5**

Name: **Maria Fernanda Cruz Cruz** Age: **1**

Name: Age:

Name: Age:

Name: Age:

Name: Age:

Name: Age:

Name: Age:

Name: Age:

Name: Age:

Name: Age:

What is the child's eye color?

Black

What is the child's hair color?

Black

What language(s) does the child speak?

None, he is a deaf mute.

What are the typical foods eaten by the child?

Rice, beans, and eggs

What is the child's favorite color?

Blue

Has the child ever gone to school?

No

What is the last grade completed?

None

Is the child currently attending school? If not, why not?

No, he is a deaf mute.

If the child has toys, what does he like the most?

Balls, cars

What toys does the child wish to have?

soccer ball and a bike

What is the father's name?

Carlos Rene Rivas Cruz

What is the father's occupation and weekly salary?

He sells ice cream and earns \$15/week

What is the mother's name?

Alba Maribel Herrera Cruz

What is the mother's occupation and weekly salary?

House wife

Describe the specific living conditions of the child in detail. List the child's material possessions.

He lives in a house with one room, one kitchen and cement floor. It is a 15 x 15 ft wooden house. His bed is made out of wood but has a mattress. They have electricity and water. He is healthy, active and intelligent.

Describe the condition of the house and living area. (please include photographs)

The house is made of wooden boards and is very small, 15 x 15 ft, with a tin roof. They have four plastic chairs, two beds, a radio and a table. He sleeps with his father.

Spiritual Information:

Has the child accepted Christ as their personal Savior?

No

Does the child attend Sunday School regularly? If not, why not?

His parents don't send him.

What is the name of the church?

What city is the church in?

What is the pastor's name?

Does the child have a favorite Bible story or verse?

None

Medical Information:

Does a doctor examine the child regularly?

Yes

Does the child have any physical or mental handicaps? (If yes, please explain.)

He has seizures, and he is a deaf mute.

What is the child's height? **4ft 1in**

weight? **52 pounds**

Placement Information:

Where is the child now living?

- ☐ Orphanage
- ☐ Christian Home
- ☒ **With their own family**
- ☐ Other (please explain)

Financial Accountability:

Will the child be willing to acknowledge (when asked in person or in writing) that they receive financial support from Final Frontiers Foundation / Touch a Life?

Yes

Will an adult be appointed to help the child to complete the letters, which will be given to the sponsor?

Yes

Who?

His mother

Summary:

If you would like to give us any information other than what was asked, please do so here.

He suffers of seizures, not severe, but ever so often. He is under medical supervision.

This application was translated by: **Nolin Vargas**

Date (d/m/y): **September 30, 2005**

This application was approved by (pastor): **Flavio Varela**

Date (d/m/y): **July 29, 2005**

This application was approved by (director): **Flavio Varela**

Date (d/m/y): **July 29, 2005**

Application for Sponsorship

Touch a Life

A child sponsorship ministry of the Final Frontiers Foundation, Inc.

I.D. _____

Personal Information on the child:

Informacion Personal del Niño

Name: Davin Ariel Cruz. Cruz
Nombre

Name child is called by if different: Yepito
Otro Nombre o Apodo

Birthday (d/m/y): 21-12-98
Cumpleaños

Nationality: Honduras
Nacionalidad

Country: Honduras
Pais

Town: San Jn. de Flores, (Lajitas)
Pueblo

What is the child's current status?

Condicion del Niño

- ☐ Orphan (Huerfano)
- ☐ Abandoned (Abandonado)
- ☒ Destitute (Pobre viviendo con su familia)
- ☐ Other (si es otro entonces explique)

MUCB 2 R ✓

6-1-05

Please write a story about how the child became orphaned or destitute or abandoned. (Make it as detailed as possible and use additional paper if necessary.)

Porfavor Escribe una pequeña historial de como el niño llego a ser orfano o Pobre o abandonado. Use muchos detalles si es posible. Si es mucho, Utilice otro papel.

Viene de Familias pobres
comes from poor family

Family Information:

Información de la Familia

Does the child have any natural brothers or sisters?

(If the answer is yes, please list their names and current ages.)

Si el Niño tiene hermanos, escribe sus nombres y edades

Name:	<u>Maxima Daniela Cruz, Cruz</u>	Age:	<u>7.5</u>
Nombre		Edad	
Name:	<u>Maria Fernanda Cruz, Cruz</u>	Age:	<u>1</u>
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	
Name:		Age:	
Nombre		Edad	

What is the child's eye color? Black
Color de Ojos del Niño Negros

What is the child's hair color? Black
Color de Pelo del Niño Negro

What language(s) does the child speak? Is Deaf and mute
Que Idioma Habla el Niño * Ninguno * ES Sordo Mudo

What are the typical foods eaten by the child? rice, beans, eggs.
Que Tipo de Comida come el Niño

Arroz, Frijoles y huevos

What is the child's favorite color? Blue
El color favorito del Niño Azul

Has the child ever gone to school?

Si el Niño has asistado la escuela **NO**

What is the last grade completed?

Cual fue el ultimo grado completado

Is the child currently attending school? If not, why not.

Si no va a la escuela entonces porque

Es SORDO MUDO * He is Deaf and Mute

If the child has toys, what does he like the most? **Balls, cars**

Que juguetes tiene el Niño

Pelotas, Carro

What toys does the child have?

Que Juguetes le gustaria tener

would like him to have Biciete, balls, (soccer)

Bisicleta, Pelata de foot ball

What is the father's name?

Nombre del Padre

Carlos Rene ~~San~~ Rivas, Cruz

What is the father's occupation and weekly salary?

En que trabaja el Padre y cuanto Gana

Sells ice cream cones \$15.00

Vende Conos gana L. 300 = Semanal

What is the mother's name?

Nombre de su madre

Alba Maribel Herrera Cruz

What is the mother's occupation and weekly salary?

Trabajo de su madre y cuanto gana

Cares for her children at home

Cuida sus hijos

Describe the specific living conditions of the child in detail. List the child's material possessions.

Detalle las condiciones en como vive el niño con detalles incluyendo su casa

Davin vive en casa de un solo cuarto, la cocina esta afuera, es de Tablas aprox. de 15x15 Pies, piso de cemento, su cama es de madera con colchon, tiene luz electrica Agua, Es un niño muy inteligente, activo y con buena salud

Davin lives in a 1 room, 1 kitchen, wood board 15x15 ft house cement floor. hes bed is wooden with matress. they do have electricity, water. He is a very intelegent boy, active and of good health.

Describe the condition of the house and living area. (please include photographs)
Detalle la condition de su casa incluyendo como duerme y sus muebles

La casa es pequeña, de tablas de 15x15 pies
tiene 4 silla plasticas, 2 Camas, Radio,
~~tiene~~ Duerme con su papá, tiene una
Mesa

El techo de la casa es de lamina
the house is small, of boards 15x15, tin roof.
they have 4 plastic chairs, 2 beds, 1 radio, 1 table.
He sleeps with his father.

Spiritual Information:

Informacion Espiritual

Has the child accepted Christ as their personal Savior? NO
Ha aceptado a Cristo el niño

Does the child attend Sunday School regularly? If not, why not? *His parents don't send him.*
Si el Niño va a la escuela dominical y si no porque
Sus padres no lo Mandan

What is the name of the church? N/A
Nombre de la Iglesia

What city is the church in? N/A
En que pueblo esta la Iglesia

What is the pastor's name? N/A
Nombre del Pastor

Does the child have a favorite Bible story or verse?
Cual es el Versiculo favorito del Niño

ninguno

Medical Information:

Informacion Medico

Does a doctor examine the child regularly?

Si el Niño es examinado regularmente por un doctor

Si Yes

Does the child have any physical or mental handicaps? (If yes, please explain.)

Si el Niño tiene algun problema de salud o mental (Si tiene, Explique)

Convulsions Seizures (Deaf, Mute)

What is the child's height?

Cunto Mide el Niño

4 ft. 1 inch.4 pie, 1 pulg.

weight?

Peso

52 lbs52 lbs**Placement Information:**

Informacion General

Where is the child now living? (Con quien vive el Niño en este momento)

- ☐ Orphanage (orfanato)
- ☐ Christian Home (con una familia Cristiana)
- ☒ With their own family (con su familia)
- ☐ Other (please explain) (Otro)

Financial Accountability:

Requesitos de Ayuda

Will the child be willing to acknowledge (when asked in person or in writing) that they receive financial support from Final Frontiers Foundation / Touch a Life?

El Niño promete cuando es preguntado decir que sus ayudas vienen de el programa Touch a Life

Si Yes Si o NOWill an adult be appointed to help the child to complete the letters, which will be given to the sponsor? Si Yes

Si el Niño va necesitar ayuda de un adulto para escribir sus cartas

Who?

Quien

su madreMother

N/A

Orphanage Information:

Informacion del Orfanato

(Complete these questions only if the child has been placed in an orphanage.)

(Escribe aqui solo si el Niño es un huérano)

Where is the orphanage located?

Adonde queda el Orfanato

What is the name of the adult who is responsible for the orphanage?

Como se llama el encargado del Orfanato

Christian Home Information:

Informacion del niño si el vive con otra familia

(Complete these questions only if the child has been placed in the home of a Christian family.)

(Escribe aqui solo si el Niño no vive con su propia familia)

What is the name of this family? _____

Nombre de la familia

Where does this family live? _____

Adonde vive la Familia

Of what materials is their house made? _____

De que es hecho la casa adonde vive

How many rooms does it have? _____

Cuantos cuartos tiene

What is the occupation of the father? _____

De que vive el padrasto

Are the husband and wife both Christians? _____

Si son Cristianos

Are they church members in good standing? _____

Si son la familia son miembros fieles en la Iglesia

Summary:

Informacion Final

If you would like to give us any information other than what was asked, please do so here.

Si hay algo que no preguntamos y es importante que sepamos del Niño, esribelo aqui

☒ Davin Sufre de Convulsiones, No Severas de Cuando en cuando, pero esta en chequeo Medico

Davin suffers seizures (convoltions), not sever just ever so often; but he is under medical supervitior

This application was translated by: _____

Firma del Traductor

Date (d/m/y): _____

Fecha

This application was approved by (pastor): _____

Firma del Pastor que lo aprobo

Date (d/m/y): _____

Fecha

This application was approved by (director): _____

Firma del Director del programa

Date (d/m/y): _____

Fecha